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FACSIMILE NUMBER: 571-273-2298  
CONFIRMATION  
TELEPHONE:  
FROM: MELODY DYE 609-631-2462  
FOR  
DIRECT DIAL: PAUL SCHWARTZ 609-631-2446  
DATE: 7-11-06  
USER NUMBER:  
FILE NUMBER: N1085-165  
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FIRM/COMPANY:		USPTO			
FACSIMILE NUMBER:		571-273-8300			
CONFIRMATION TELEPHONE:					
FROM:		PAUL A. Schwartz, Esq.			
DIRECT DIAL:		609.631.2446			
DATE:		June 21, 2006			
FILE:		ATTORNEY DOCKET NO.: N1085-165/2003-0093 APPLICATION SERIAL NO. 10/898,648 FILED: 03/21/2006 ART UNIT: 4151			
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FIRM/COMPANY: USPTO

FACSIMILE NUMBER: 571-273-8300

CONFIRMATION  
TELEPHONE:

FROM: Paul A. Schwarz, Esq.

DIRECT DIAL: 609.631.2446

DATE: June 21, 2006

FILE: ATTORNEY DOCKET NO.: N1085-165/2003-0093  
APPLICATION SERIAL NO. 10/898,648  
FILED: 03/21/2006  
ART UNIT: 4151

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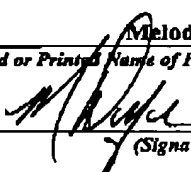
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<b>CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)</b> Applicant(s): <b>Wen-Ting Chu</b>		Docket No. <b>2003-0093/N1085-00156</b>	
Application No. <b>10/689,462</b>	Filing Date <b>10/20/2003</b>	Examiner <b>Allan R. Wilson</b>	Group Art Unit <b>2815</b>
Invention: <b>SPLIT GATE FIELD EFFECT TRANSISTOR WITH A SELF ALIGNED CONTROL GATE</b>			
<div style="margin-top: 100px;"> <p>I hereby certify that this <u>After Final Amendment and Response and Transmittal Letter</u>  <small>(Identify type of correspondence)</small></p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>571-273-8300</u>)</p> <p>on <u>June 21, 2006</u>  <small>(Date)</small></p> <div style="text-align: right; margin-top: 50px;"> <p><u>Melody Dye</u>  <small>(Typed or Printed Name of Person Signing Certificate)</small></p> <p>  <small>(Signature)</small></p> </div> </div> <p style="text-align: center; margin-top: 100px;"> <b>Note: Each paper must have its own certificate of mailing.</b> </p>			

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: Wen-Ting Chu

Examiner: Wilson, Allan R.

Serial No.: 10/689,462

Group Art Unit: 2815

Filed: 10/20/2003

Date: June 21, 2006

For: SPLIT GATE FIELD EFFECT  
TRANSISTOR WITH A SELF ALIGNED  
CONTROL GATE

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AFTER FINAL AMENDMENT AND RESPONSE**

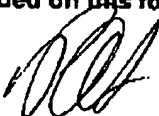
Dear Sir:

This paper is responsive to the Office Action dated March 21, 2006. Kindly enter the following amendments and remarks:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 7 of this paper.

AUG 3 - 2006

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					Docket No. <b>N1085-156/2003-0093</b>	
Applicant(s): <b>Wen-Ting Chu</b>						
Application No. <b>10/689,462</b>	Filing Date <b>10/20/2003</b>	Examiner <b>Allan R. Wilson</b>	Customer No. <b>54657</b>	Group Art Unit <b>2815</b>	Confirmation No. <b>4151</b>	
Invention: <b>SPLIT GATE FIELD EFFECT TRANSISTOR WITH A SELF ALIGNED CONTROL GATE</b>						
<b>COMMISSIONER FOR PATENTS:</b>						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	20	20	0	x \$50.00	\$0.00	
INDEP. CLAIMS	3	3	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<input type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. <b>04-1679</b> in the amount of <b>\$0.00</b> <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <b>04-1679</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.						
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>						
 Signature			Dated: <b>June 21, 2006</b>			
<b>Paul A. Schwarz, Esq.</b> <b>Registration No. 37,577</b>  <b>Duane Morris LLP</b> <b>P.O. Box 5203</b> <b>Princeton, New Jersey 08543-5203</b> <b>Telephone: 609-631-2446</b> <b>Facsimile: 609-631-2401</b>			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date)  _____ Signature of Person Mailing Correspondence  _____ Typed or Printed Name of Person Mailing Correspondence			
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